03/20/2008 12:49

### FEC FORM 3X

# REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee Office Use Only 1. NAME OF **USE FEC MAILING LABEL** Example:If typing, type COMMITTEE (in full) OR TYPE OR PRINT over the lines American Health Care Association Political Action Committee 1201 L Street, NW ADDRESS (number and street) Check if different than previously DC 20005 Washington reported. (ACC) FEC IDENTIFICATION NUMBER **STATE** ZIPCODE 🛋 CITY A IS THIS NEW **AMENDED** C00006080 Χ REPORT OR (N) (A) **TYPE OF REPORT** (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Year Only) Report (Choose One) Due On: Dec 20 (M12) (Non-Election Year Only) Χ Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (a) Quarterly Reports: Apr 20 (M4) Jul 20 (M7) Oct 20 (M10) Jan 31 (YE) April 15 Quarterly Report(Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 PRE-Election Quarterly Report(Q2) Report for the: Convention (12C) Special (12G) October 15 Quarterly Report(Q3) January 31 Quarterly Report(YE) in the Election on State of July 31 Mid-Year (d) 30-Day Report(Non-election Year Only) (MY) Post -Election General (30G) Runoff (30R) Special (30S) Report for the: **Termination Report** (TER) in the Election on State of 02 0 1 2008 02 29 2008 through Covering Period I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Ms. Gail Clarkson Type or Print Name of Treasurer Electronically Filed by Ms. Gail Clarkson 03 20 2008 Signature of Treasurer Date NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g. Office **FEC FORM 3X** Use (Rev. 12/2004) Only

FE6AN026

### **SUMMARY PAGE**

OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name American Health Care Association Political Action Committee <sup>®</sup> D " D 0 2 0.2 29 0 1 2008 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2008 112871.46 January 1 (b) Cash on Hand at 193140.95 Begining of Reporting Period ..... 68976.43 166340.99 (c) Total Receipts (from Line 19) ..... (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines 262117.38 279212.45 6(a) and 6(c) for Column B) ..... 153269.14 170364.21 7. Total Disbursements (from Line 31) ...... Cash on Hand at Close of Reporting Period 108848.24 108848.24 (subtract Line 7 from Line 6(d)) ..... 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) ..... This Committee has qualified as a multicandidate committee. (see FEC FORM 1M)

### For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

### DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name

American Health Care Association Political Action Committee

0 1 м м 0 2 0 2 M 2<sup>D</sup>9 2008 2008 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 154725.00 66850.00 (i) Itemized (use Schedule A) .......... 2126.43 9115.99 (ii) Unitemized ..... (iii) TOTAL (add 68976.43 163840.99 Lines 11(a)(i) and (ii) ...... 0.00 0.00 (b) Political Party Committees ..... Other Political Committees 0.00 2500.00 (such as PACs) ..... Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 68976.43 166340.99 Totals to Line 33, page 5) ...... 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees ..... 0.00 0.00 13. All Loans Received ..... 0.00 0.00 14. Loan Repayments Received ..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) ..... 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees ..... 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) ..... 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) ..... 0.00 0.00 (b) Levin Funds (from Schedule H5) ...... 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 68976.43 166340.99 12, 13, 14, 15, 16, 17, and 18(c)) .....

68976.43

166340.99

20. Total Federal Receipts

(subtract Line 18(c) from Line 19) .....

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures: (a) Shared Federal/Non-Federal		
Activity (from Schedule H4)  (i) Federal Share	0.00	0.00
(ii) Non-Federal Share	0.00	0.00
(b) Other Federal Operating  Expenditures	1219.14	2064.21
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	1219.14	2064.21
22. Transfers to Affiliated/Other Party		
Committees23. Contributions to		0.00
Federal Candidates/Committeesand Other Political Committees	152050.00	164550.00
24. Independent Expenditure (use Schedule E)	0.00	0.00
<ol> <li>Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)</li> </ol>	0.00	0.00
26. Loan Repayments Made	0.00	0.00
27. Loans Made	0.00	0.00
Refunds of Contributions To:     (a) Individuals/Persons Other     Than Political Committees	0.00	3750.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs)	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	3750.00
29. Other Disbursements		0.00
30. Federal Election Activity (2 U.S.C 431(20 (a) Shared Federal Election Activity	0))	
(from Schedule H6) (i) Federal Share	0.00	0.00
(ii) "Levin" Share	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00
31. Total Disbursements (add Lines 21(c), 2 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	450000 44	170364.21
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)	450000 44	4700045
from Line 31)	153269.14	170364.21

### **DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
	Total Contributions (other than loans) from Line 11(d), page 3)	68976.43	166340.99
	Total Contribution Refunds (from Line 28(d))	0.00	3750.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	68976.43	162590.99
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	1219.14	2064.21
	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	1219.14	2064.21

FE6AN026

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 44 (check only one)    X
	Any information copied from such Reports and Sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Health Care Association Pole	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ <b>.</b> .	Full Name (Last, First, Middle Initial) Gary Attman  Mailing Address 8028 Ritchie Highway Suite 118  City	State	Zip Code	Date of Receipt  0 2 0 8 2 0 0 8
	Pasadena	MD	21122-1069	Transaction ID: C390835
	FEC ID number of contributing federal political committee.	C	21122-1009	Amount of Each Receipt this Period  1250.00
	Name of Employer FutureCare Health & Mgmt.  Receipt For:  Primary General  Other (specify) ▼	Occupation President Aggregate		
 3.	Full Name (Last, First, Middle Initial) Cecil Barcelo Mailing Address 411 Alabama Ave			Date of Receipt  0 2 2 2 2 0 0 8
	City	State	Zip Code	Transaction ID: C394264
	League City	TX	77573-2615	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		250.00
	Name of Employer Baywind Village	Occupatio Administ		
	Receipt For: Primary General Other (specify)	Aggregate	e Year-to-Date ▼ 250.00	
. –	Full Name (Last, First, Middle Initial) Don B. B Bedell	l		Date of Receipt
	Mailing Address PO Box 1210			02 06 7 9 9 9
	City	State	Zip Code	Transaction ID: C390216
	Sikeston	MO	63801-1210	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	С		1250.00
	Name of Employer Health Facilities Mgmt Co.	Occupatio Presiden		
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1250.00	
	SUBTOTAL of Receipts This Page (optional)			2750.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 7 / 44 (check only one)    X
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Health Care Association Pol	name and ad	dress of any political committee to	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) Don C. C Bedell  Mailing Address 731 North Main Street PO Box 1210  City Sikeston  FEC ID number of contributing federal political committee.	State MO	Zip Code 63801	Date of Receipt  M M O 2 O 6 O 2 O 0 8  Transaction ID: C390212  Amount of Each Receipt this Period  1250.00
Name of Employer Health Facilities Mgmt Co- rp Receipt For:  ☐ Primary ☐ General ☐ Other (specify) ▼	Occupation President Aggregate		
Full Name (Last, First, Middle Initial) Harold Beebe Mailing Address 14 Northtown Dr Ste 202 City Jackson FEC ID number of contributing federal political committee.  Name of Employer Delco Inc.  Receipt For: Primary General	State MS C Occupation Manager Aggregate		Date of Receipt    M   M   D   D   Y   Y   Y   Y   Y   Y   Y   Y
Full Name (Last, First, Middle Initial) Jim Birchem Mailing Address 211 1 st Street SE  City Little Falls  FEC ID number of contributing federal political committee.	State MN	Zip Code 56345	Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Eldercare of Minnesota  Receipt For:  Primary General  Other (specify) ▼	Occupation President Aggregate		
SUBTOTAL of Receipts This Page (optional)			1750.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 44 (check only one)  X 11a 11b 11c 12 13 14 15 16
A	ny information copied from such Reports and for commercial purposes, other than using the	Statements ma	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
	NAME OF COMMITTEE (In Full)  American Health Care Association Po	olitical Action	Committee	
<u>K</u>	Full Name (Last, First, Middle Initial) Lane Bowen			Date of Receipt
	Mailing Address 680 South Fourth Str	eet		02 12 2008
	City	State	Zip Code	Transaction ID: C391977
	Louisville	KY	40202	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1250.00
	Name of Employer Kindred Healthcare	Occupation EVP & P	n resident, Health Services Div	vis
	Receipt For:		e Year-to-Date ▼	
	Primary General Other (specify) ▼		1250.00	
_	Full Name (Last, First, Middle Initial) Timothy J Boyle			Date of Receipt
	Mailing Address 4412 Applewood Ave	nue		02 06 2008
	City	State	Zip Code	Transaction ID: C390217
	Sioux City	IA	51106-3602	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		1250.00
	Name of Employer Care Center Mgmt Co	Occupation Chief Op	n perating Officer	
	Receipt For:	Aggregate	e Year-to-Date	
	Primary General Other (specify) ▼		1250.00	
	Full Name (Last, First, Middle Initial) Gregory Chambery			Date of Receipt
	Mailing Address 100 Daniel Drive			0 2 1 2 2 0 0 8
	City	State	Zip Code	Transaction ID: C391983
	Webster	NY	14580-2912	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		300.00
	Name of Employer Maplewood Nursing Home	Occupation Administ		
	Receipt For:	Aggregate	e Year-to-Date ▼	
	Primary General Other (specify) ▼		300.00	]
	SUBTOTAL of Receipts This Page (optional)			2800.00

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 44 (check only one)    X
Ar	y information copied from such Reports and S for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Health Care Association Po	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	Full Name (Last, First, Middle Initial) Don Chensvold Mailing Address 4080 1st Avenue NE			Date of Receipt
	PO Box 5428			02 13 2008
	City	State	Zip Code	Transaction ID: C392046
	Cedar Rapids  FEC ID number of contributing federal political committee.	C	52402-3160	Amount of Each Receipt this Period  300.00
	Name of Employer Health Care of Iowa Inc	Occupation Vice Pres		
	Receipt For:  ☐ Primary ☐ General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 300.00	
. –	Full Name (Last, First, Middle Initial) Steven E. Chies Mailing Address 8624 Mississippi Blvd	NW		Date of Receipt
	- OOZ4 Wilssissippi Divu	02 06 2008		
	City	State	Zip Code	Transaction ID: C390220
	Coon Rapids  FEC ID number of contributing federal political committee.	C	55433-5968	Amount of Each Receipt this Period  1250.00
	Name of Employer Benedictine Health System- Cambridge	, ' · · · ·	Term Care Services	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1250.00	
	Full Name (Last, First, Middle Initial) Gerald Cox	1		Date of Receipt
	Mailing Address PO Box 7728			02 15 YYYY 2008
	City	State	Zip Code	Transaction ID: C393804
	Rocky Mount	NC	27804-0728	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		2500.00
	Name of Employer Autumn Corp	Occupation Presiden	t	
	Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 2500.00	
	UBTOTAL of Receipts This Page (optional)	1		4050.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	<b>ZED RECEIPTS</b> for each category of the Detailed Summary Page	
A 0	r for commercial purposes, other than using the	tatements may not be sold or used by any name and address of any political commit	person for the purpose of soliciting contributions tee to solicit contributions from such committee.
	NAME OF COMMITTEE (In Full)  American Health Care Association Po	itical Action Committee	
	Full Name (Last, First, Middle Initial) Hap Cursey		Date of Receipt
	Mailing Address 531 Stevenson Ln		02 25 2008
	City Towson	State Zip Code MD 21286-7607	Transaction ID: C394479  Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	1000.00
	Name of Employer Holly Hill Manor	Occupation Administrator	
	Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼	0
_	Full Name (Last, First, Middle Initial) Michael D'Arcangelo		Date of Receipt
	Mailing Address 200 Dryden Road Suite 2000		02 08 7 2008
	City	State Zip Code	Transaction ID: C390843
	Dresher  FEC ID number of contributing federal political committee.	PA 19025	Amount of Each Receipt this Period  1250.00
	Name of Employer Complete Healthcare Resou- rces	Occupation Senior Executive Vice President	
	Receipt For: Primary General Other (specify)	Aggregate Year-to-Date ▼ 1250.00	O TOTAL CONTRACTOR OF THE PROPERTY OF THE PROP
_	Full Name (Last, First, Middle Initial) Paul Diaz	<u> </u>	Date of Receipt
	Mailing Address 680 S 4th St		02 04 2008
	City	State Zip Code	Transaction ID: C390844
	Louisville FEC ID number of contributing federal political committee.	KY 40202-2407	Amount of Each Receipt this Period 1000.00
	Name of Employer Kindred HealthCare	Occupation Sr Vice President/CFO	
	Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼	0
	SUBTOTAL of Receipts This Page (optional)	1	3250.00

A.

В.

C.

SCHEDULE A (FEC Form 3X)	Use separate schedule(s)	FOR LINE NUMBER: PAGE 11 / 44
ITEMIZED RECEIPTS	for each category of the	(Check only one)
TI LIMILED TILOLII TO	Detailed Summary Page	X   11a   11b   11c   12
Any information copied from such Reports and St	atomonts may not be sold or used by any n	13 14 15 16 17
or for commercial purposes, other than using the	name and address of any political committee	ee to solicit contributions from such committee.
NAME OF COMMITTEE (In Full)		
American Health Care Association Poli	tical Action Committee	
Full Name (Last, First, Middle Initial) Paul Diaz		Date of Receipt
Mailing Address 680 S 4th St		02 25 2008
City	State Zip Code	Transaction ID: C394477
Louisville	KY 40202-2407	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Kindred HealthCare	Occupation Sr Vice President/CFO	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	2000.00	·
Other (specify)	2500.00	
Full Name (Last, First, Middle Initial) Tripp Francis		Date of Receipt
Mailing Address 102 Woodchase Park [	Prive	M M / D D / Y Y Y Y
Cit.	Charles 70 conde	02 15 2008
City	State Zip Code MS 39056-4113	Transaction ID: C392679
Clinton	MS 39056-4113	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Trinity Mission of Clinton LLC	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	4000.00	'
Other (specify)		
Full Name (Last, First, Middle Initial) Tripp Francis		Date of Receipt
Mailing Address 102 Woodchase Park [	Orive	0 2 1 5 / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: C392698
Clinton	MS 39056-4113	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Trinity Mission of Clinton LLC	Occupation Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General	4000.00	•
Other (specify)	400.00	

TOTAL This Period (last page this line number only) .....

SCHEDULE A	•	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 44 (check only one)  X 11a 11b 11c 12  13 14 15 16 17
or for commercial purpo	ses, other than using the name	e and address of any political committee	rson for the purpose of soliciting contributions to solicit contributions from such committee.
Full Name (Last, First Tripp Francis Mailing Address 1  City Clinton  FEC ID number of c federal political communications	02 Woodchase Park Drive	State Zip Code MS 39056-4113	Date of Receipt  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Name of Employer Trinity Mission of CI LLC Receipt For: Primary Other (specify	A A General	ccupation dministrator ggregate Year-to-Date  4000.00	
	132 Oakland Trce NE		Date of Receipt    M   M   M   / D   D   / Y   Y   Y   Y   Y   Y   Y   Y   Y
Atlanta FEC ID number of c federal political com	ontributing mittee.	State         Zip Code           GA         30319-2685	Amount of Each Receipt this Period  1000.00
Name of Employer Beverly Enterprises  Receipt For: Primary Other (specify	General In	ccupation  Iformation Requested  ggregate Year-to-Date   1000.00	
	atricia Giorgio/ Evergreen	Estate	Date of Receipt
City Cedar Rapids		State Zip Code IA 52404-1307	Transaction ID: C394907  Amount of Each Receipt this Period
FEC ID number of c federal political communications Name of Employer Evergreen Estates	nittee.	ccupation	500.00
Receipt For: Primary Other (specify	General	ggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receip	ts This Page (optional)		2500.00

SCHEDULE A (FEC Form 3X ITEMIZED RECEIPTS	()	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 44 (check only one)    X
Any information copied from such Reports an or for commercial purposes, other than using  NAME OF COMMITTEE (In Full)  American Health Care Association	the name and add	dress of any political committee to	on for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) James Gomez  Mailing Address 2201 K Street			Date of Receipt
City Sacramento	State CA	Zip Code 95816-4922	Transaction ID: C390224  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer CA Association of Health Facilities Receipt For:  Primary  General  Other (specify) ▼	Occupation Presiden Aggregate		
Full Name (Last, First, Middle Initial) Jon Howell Mailing Address 334 Fountainhead [	Orive		Date of Receipt  M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State	Zip Code	Transaction ID: C394625
<u>Jefferson</u>	GA	30549	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Georgia Health Care Assoc- iation	Occupatio State Ex	ecutive	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	]
Full Name (Last, First, Middle Initial) Richard Kase	<u> </u>		Date of Receipt
Mailing Address 5125 Pine Rockland	ds Avenue		02 06 2008
City	State	Zip Code	Transaction ID: C390223
Lithia FEC ID number of contributing federal political committee.	FL C	33547	Amount of Each Receipt this Period  250.00
Name of Employer Cypress Healthcare	Occupatio Presiden		
Receipt For: Primary General Other (specify)	Aggregate	Year-to-Date ▼ 250.00	
SUBTOTAL of Receipts This Page (optiona	J)	<b>)</b>	1500.00

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER:   PAGE 14 / 44   (check only one)
Any information copied from such Reports and or for commercial purposes, other than using the	Statements ma	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions
NAME OF COMMITTEE (In Full)  American Health Care Association Po		• •	
Full Name (Last, First, Middle Initial) Francis P. Kirley			Date of Receipt
Mailing Address 1430 Progress Way Ste 108			02 08 7 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City Sykesville	State MD	Zip Code 21784-6484	Transaction ID: C390829  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	С		5000.00
Name of Employer Nexion Health, Inc.	Occupatio Presiden		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial) Marian Kirley			Date of Receipt
Mailing Address 1430 Progress Way			0 2
City Sykesville	State MD	Zip Code 21784	Transaction ID: C390830
FEC ID number of contributing federal political committee.	C	21704	Amount of Each Receipt this Period  5000.00
Name of Employer Nexion	Occupatio Owner	n	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 5000.00	
Full Name (Last, First, Middle Initial) Peter J. Licari			Date of Receipt
Mailing Address 200 Dryden Road Suite 2000			02 04 7 2008
City Dresher	State <b>PA</b>	Zip Code 19025	Transaction ID: C390842
FEC ID number of contributing federal political committee.	C	19025	Amount of Each Receipt this Period  1250.00
Name of Employer Complete Healthcare Resou- rces	Occupatio Presiden	n t/ Chief Executive Officer	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1250.00	
SUBTOTAL of Receipts This Page (optional)		<b>\</b>	11250.00

SCHEDULE A (FEC Form 3X) FEMIZED RECEIPTS	Use separate sched for each category of Detailed Summary	f the (Check only one)
Any information copied from such Reports and or for commercial purposes, other than using to NAME OF COMMITTEE (In Full)  American Health Care Association F		any person for the purpose of soliciting contributions mmittee to solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Christian Mason Mailing Address 9375 SW Commerce		Date of Receipt  O 2 1 3 2 0 0 8
City	State Zip Code	Transaction ID: C391157
Wilsonville	OR 97070	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Vigilan, Inc.	Occupation President & CEO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	00.00
Full Name (Last, First, Middle Initial) Michael McBride Mailing Address 101 Grace Dr		Date of Receipt
		02 06 2008
City	State Zip Code	Transaction ID: C390219
Easley FEC ID number of contributing federal political committee.	SC 29640-9088	Amount of Each Receipt this Period  1250.00
Name of Employer Health Management Resourc- es	Occupation President	
Receipt For:  Primary General  Other (specify)	Aggregate Year-to-Date ▼	50.00
Full Name (Last, First, Middle Initial) Michaela Miller		Date of Receipt
Mailing Address 20023 SW Corrine S	treet	02 06 2008
City	State Zip Code	Transaction ID: C390214
Beaverton	OR 97007-8637	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer Avamere Health Services	Occupation Shareholder	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼	50.00
SUBTOTAL of Receipts This Page (optional)		3000.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 16 / 44 (check only one)    X
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Health Care Association	the name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Richard Miller  Mailing Address 3611 Glenfield Ct			Date of Receipt
City Louisville	State KY	Zip Code 40241-2513	Transaction ID: C390221  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		250.00
Name of Employer Golden Ventures  Receipt For:  Primary  General  Other (specify) ▼	Occupatio Consulta Aggregate		
Full Name (Last, First, Middle Initial) Rick Miller  Mailing Address 25117 SW Parkwa Suite F	y Avenue		Date of Receipt  0 2 0 6 2 0 0 8
City	State	Zip Code	Transaction ID: C390213
Wilsonville  FEC ID number of contributing federal political committee.	OR	97070-9697	Amount of Each Receipt this Period 1250.00
Name of Employer Avamere Health Services, NC Receipt For:  Primary  General  Other (specify) ▼	Occupation Presiden Aggregate		]
Full Name (Last, First, Middle Initial) V. Richard Miller			Date of Receipt
Mailing Address 3594 East US High	iway 30		02 06 2008
City	State	Zip Code	Transaction ID: C390218
Warsaw FEC ID number of contributing federal political committee.	C	46580-6720	Amount of Each Receipt this Period  1250.00
Name of Employer MMM Invest Inc	Occupatio CEO/CF		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1250.00	
SUBTOTAL of Receipts This Page (optional	al)		2750.00

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 17 / 44 (check only one)  X 11a 11b 11c 12  13 14 15 16
Any information copied from such Reports or for commercial purposes, other than usi  NAME OF COMMITTEE (In Full)  American Health Care Association	and Statements may not be sold or used by any person ng the name and address of any political committee to an Political Action Committee	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Jay Moskowitz		Date of Receipt
Mailing Address 2932 Fenton Stre	et	02 06 2008
City	State Zip Code	Transaction ID: C390209
Wheat Ridge	CO 80214-8116	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1000.00
Name of Employer Quality Life Management	Occupation Administrator	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Jay Moskowitz		Date of Receipt
Mailing Address 2932 Fenton Stre	et	02 12 2008
City	State Zip Code	Transaction ID: C391146
Wheat Ridge	CO 80214-8116	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	-750.00
Name of Employer Quality Life Management	Occupation Administrator	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 250.00	
Full Name (Last, First, Middle Initial) Michael A Newton		Date of Receipt
Mailing Address 1430 Progress W Ste 108	'ay	02 27 2008
City Eldersburg	State Zip Code MD 21784-6484	Transaction ID: C394598  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	500.00
Name of Employer Nexion Health	Occupation Director of Human Resources	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page (optic	onal)	750.00

TOTAL This Period (last page this line number only) .....

ITEMIZED RECEIPTS	for each category of the Detailed Summary Page	(check only one)    X   11a
Any information copied from such Reports at or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Health Care Association	nd Statements may not be sold or used by any personal the name and address of any political committee to Political Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Charles Perry		Date of Receipt
Mailing Address 4550 West Oakey Suite 99B	Boulevard	0 2 0 6 Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: C390215
Las Vegas	NV 89102-1599	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer Nevada Health Care Assn.	Occupation Executive Director	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	
Full Name (Last, First, Middle Initial) Vanessa Phipps Phipps Henderson	<b>-</b>	Date of Receipt
Mailing Address 114 Marketridge Dr	ive	02 19 2008
City	State Zip Code	Transaction ID: C394229
Ridgeland  FEC ID number of contributing federal political committee.	MS 39157-6009	Amount of Each Receipt this Period  1000.00
Name of Employer Mississippi Health Care Association	Occupation Executive Director	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1000.00	
Full Name (Last, First, Middle Initial) Neil L. Pruitt, Jr.	I	Date of Receipt
Mailing Address 3945 Lawrenceville	Hwy NW	02 06 YYYYY 02 06 2008
City	State Zip Code	Transaction ID: C393407
<u>Lilburn</u>	GA 30047-2817	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer UHS-Pruitt Corporation, Inc.	Occupation President & CEO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	
SUBTOTAL of Receipts This Page (optional	ıl)	3500.00

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 19 / 44 (check only one)  X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full)  American Health Care Association Po	Statements may not be sold or used by any pers e name and address of any political committee to blitical Action Committee	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial)  Matthew Robinson  Mailing Address 10003 Woodloch For Ste 250  City  The Woodlands  FEC ID number of contributing federal political committee.  Name of Employer Health Mark Group, LTD  Receipt For:  Primary General  Other (specify) ▼	est Dr  State Zip Code TX 77380-1920  C  Occupation Managing Member  Aggregate Year-to-Date  5000.00	Date of Receipt  M M M / D D N Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) Leonard Russ  Mailing Address 40 Keogh Lane  City  New Rochelle  FEC ID number of contributing federal political committee.  Name of Employer Bayberry Nursing Home  Receipt For:  Primary General  Other (specify)	State Zip Code NY 10805-1308  C  Occupation Administrator  Aggregate Year-to-Date  750.00	Date of Receipt  M M M / D D O 2 2008  Transaction ID: C390222  Amount of Each Receipt this Period  750.00
Full Name (Last, First, Middle Initial)  Dion Sena  Mailing Address 1301 NE 104th Street  City  Miami Shores  FEC ID number of contributing federal political committee.  Name of Employer Alachua Health Consultants Inc.  Receipt For:  Primary General  Other (specify)	State Zip Code FL 33138-2661  C  Occupation Owner  Aggregate Year-to-Date   1000.00	Date of Receipt    M M M
SUBTOTAL of Receipts This Page (optional)		6750.00

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	<b>X</b> )	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 20 / 44 (check only one)    X   11a
Any information copied from such Reports are or for commercial purposes, other than using NAME OF COMMITTEE (In Full)  American Health Care Association			
Full Name (Last, First, Middle Initial)	Tollical Action	Committee	
Louis Serra  Mailing Address 2525 Pennsylvania	ı Ave		Date of Receipt  0 2 2 5 2 0 0 8
City	State	Zip Code	Transaction ID: C394485
Weirton  FEC ID number of contributing federal political committee.	C	26062-3634	Amount of Each Receipt this Period 500.00
Name of Employer Weirton Geriatric Center Receipt For:	<del>- ' '</del>	n dministrator e Year-to-Date ▼	
Primary ☐ General Other (specify) ▼	0 0	500.00	
Full Name (Last, First, Middle Initial) John Kennon Shea			Date of Receipt
Mailing Address 1810 Gillespie Way Suite 212			02 06 2008
City <u>El Cajon</u>	State CA	Zip Code 92020-0921	Transaction ID: C390211  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1250.00
Name of Employer Kennon S. Shea and Associ- ates	Occupation Presiden		
Receipt For:  Primary General  Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1250.00	]
Full Name (Last, First, Middle Initial) Ron Taylor			Date of Receipt
Mailing Address PO Box 100129			02 08 2008
City Nashville	State TN	Zip Code 37224-0129	Transaction ID: C390832  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		1000.00
Name of Employer Tennessee Health Care Assn	Occupation Dir. of Go	n ov't Relations	
Receipt For:  Primary General  Other (specify) ▼	Aggregate	Year-to-Date ▼ 1000.00	
SUBTOTAL of Receipts This Page (optional	al)		2750.00

TOTAL This Period (last page this line number only) .....

SCHEDULE A (FEC Form 3 ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 21 / 44 (check only one)    X
Any information copied from such Reports or for commercial purposes, other than usin NAME OF COMMITTEE (In Full)  American Health Care Association	and Statements may not be sold or used by any persong the name and address of any political committee to a Political Action Committee	on for the purpose of soliciting contributions o solicit contributions from such committee.
Full Name (Last, First, Middle Initial) Dixie Taylor-Huff		Date of Receipt
Mailing Address 932 East Baddour	<u> </u>	02 13 7 2008
City Lebanon	State Zip Code TN 37087-3707	Transaction ID: C391156  Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer Quality Care Health Center	Occupation Administrator/Owner	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 1250.00	
Full Name (Last, First, Middle Initial) Jan Thayer		Date of Receipt
Mailing Address 404 Woodland Dr		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	State Zip Code	Transaction ID: C393802
Grand Island	NE 68801	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	1250.00
Name of Employer Riverside Lodge	Occupation Owner/Administrator	
Receipt For:	Aggregate Year-to-Date ▼	
Primary General Other (specify) ▼	1250.00	]
Full Name (Last, First, Middle Initial) Robert Van Dyk		Date of Receipt
Mailing Address 304 South Van Di	en Avenue	02 08 2008
City	State Zip Code	Transaction ID: C390834
Ridgewood	NJ 07450-5200	Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	5000.00
Name of Employer Van Dyk Health Care	Occupation President/CEO	
Receipt For:  Primary General  Other (specify) ▼	Aggregate Year-to-Date ▼ 5000.00	
	nal)	7500.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 22 / 44 (check only one)    X   11a
\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) American Health Care Association Po	e name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
<u>/</u>	Full Name (Last, First, Middle Initial) Marilyn K. Weber Mailing Address PO Box 386  City Wellington  FEC ID number of contributing federal political committee.  Name of Employer Weber Health Care Center, Inc.  Receipt For: Primary General Other (specify)	State OH C Occupation Superint Aggregate		Date of Receipt    M M
	Full Name (Last, First, Middle Initial) Barton D. Weisman  Mailing Address 5310 NW 33rd Ave Ste 211  City Ft Lauderdale  FEC ID number of contributing federal political committee.  Name of Employer Weisman Associates  Receipt For: Primary General Other (specify)	State FL C Occupation Presiden Aggregate		Date of Receipt  M M M / D D / Y Y Y Y Y  2 0 0 8  Transaction ID: C394627  Amount of Each Receipt this Period  2500.00
 ::	Full Name (Last, First, Middle Initial)  Mark Woolpert  Mailing Address 200 S 13th St Ste 205  City  Grover Beach  FEC ID number of contributing federal political committee.  Name of Employer Compass Health Care  Receipt For: Primary General Other (specify)	State CA C Occupation Presiden Aggregate		Date of Receipt  M M M D D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	SUBTOTAL of Receipts This Page (optional)			8000.00
	TOTAL This Period (last page this line number	only)		66850.00

A.

В.

### SCHEDULE B (FEC Form 3X)

President

District:

FOR LINE NUMBER: PAGE 23 / 44 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 21b 22 23 25 26 **Detailed Summary Page** 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) American Health Care Association Political Action Committee Full Name (Last, First, Middle Initial) Transaction ID: D60593 **BB & T CREDIT CARD** Date of Disbursement 2 9 0 2 2008 Mailing Address 2200 Wilson Blvd Ste 200 City State Zip Code Amount of Each Disbursement this Period Arlington VA 22201-3324 937.12 Purpose of Disbursement CC Fees Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) District: State: Full Name (Last, First, Middle Initial) Transaction ID: D60592 BB & T Date of Disbursement 2 9 0 2 2008 Mailing Address PO Box 819 **Operations Center** City State Zip Code Amount of Each Disbursement this Period 27894-0819 Wilson NC 282.02 Purpose of Disbursement Bank Fees Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General

SUBTOTAL of Disbursements This Page (optional)	•	1219.14
TOTAL This Period (last page this line number only)	<b>•</b>	1219.14

Other (specify)

State:

	CHEDULE B (FEC FOIII 3X)	Use separate schedule	S)   (	OR LINE check only	E NUMBER: PAGE 24 / 4 Iv one)			
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Pag		21b 27	22 X 23 24 25 28a 28b 28c 29			
	y Information copied from such Reports and State for commercial purposes, other than using the r							
$\rangle$	NAME OF COMMITTEE (In Full) American Health Care Association Poli	tical Action Committee						
<u>/</u>	Full Name (Last, First, Middle Initial) ANDRE CARSON FOR CONGRESS				Transaction ID: D60140 Date of Disbursement			
	Mailing Address 2527 North Alabama	Street			02 13 7 2008			
	City Indianapolis	State Zip Code IN 46205			Amount of Each Disbursement this Period			
	Purpose of Disbursement Contributions to federal candidates				1000.00			
	Candidate Name Andre Carson			egory/ ype				
	Office Sought:  X House Senate President State: IN District: 07	ursement For: 2008  X Primary General  Other (specify) ▼	ıl					
	Full Name (Last, First, Middle Initial) BLUE DOG POLITICAL ACTION COM	MITTEE			Transaction ID: D60039 Date of Disbursement			
	Mailing Address 6849 Old Dominion D Suite 222	rive			$\begin{bmatrix}\begin{smallmatrix}M\\02\end{smallmatrix}\end{bmatrix}^M \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$			
	City McLean	State Zip Code VA 22101			Amount of Each Disbursement this Perio			
	Purpose of Disbursement Contributions to Federal Committees				5000.00			
	Candidate Name			egory/ ype				
	Office Sought:    House   Disb     Senate   President     State:   District:	ursement For: Primary General Other (specify) ▼	ıl					
	Full Name (Last, First, Middle Initial) Democratic National Committee				Transaction ID: D60219 Date of Disbursement			
	Mailing Address 1625 Massachusetts	Ave, NW			02 0 7 2 0 7 2 0 8			
	City Washington	State Zip Code DC 20036			Amount of Each Disbursement this Perio			
	Purpose of Disbursement Contributions to Federal Committees Candidate Name			egory/ /pe	15000.00			
	Office Sought: House Disb Senate President	ursement For: Primary General Other (specify)		140				
	State: District:							

		Use separate schedule	S)	(check o	NE NUMBER: PAGE 25 / 44 only one)
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	;	21b 27	22 X 23 24 25 28 28a 28b 28c 29
	y Information copied from such Reports and State for commercial purposes, other than using the nan NAME OF COMMITTEE (In Full)	ne and address of any politic			
V	American Health Care Association Politica	al Action Committee			
•	Full Name (Last, First, Middle Initial) Herseth for Congress  Mailing Address PO Box 85352				Transaction ID: D60058 Date of Disbursement    M 2   D 5   Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City Sioux Falls	State Zip Code SD 57118-535	2		Amount of Each Disbursement this Period
	Purpose of Disbursement Contributions to Federal Candidates				1000.00
	Candidate Name Rep. Stephanie Herseth Sandlin			tegory/ Type	
		ement For: 2008  Primary General Other (specify)	I		
	Full Name (Last, First, Middle Initial) JIM RISCH FOR US SENATE COMMITTI	EE			Transaction ID: D60085 Date of Disbursement
	Mailing Address 407 W JEFFERSON ST	REET			02 06 7 2008
	City Boise	State Zip Code ID 83702			Amount of Each Disbursement this Period
	Purpose of Disbursement Contributions to Federal Candidates				1000.00
	Candidate Name Jim Risch			tegory/ Γype	
	ÿ	ement For: 2008  ( Primary General Other (specify)	I		
	Full Name (Last, First, Middle Initial) JOHN MCCAIN 2008 INC.				Transaction ID: D60133 Date of Disbursement
	Mailing Address PO BOX 16118				02 13 7 2008
	City ARLINGTON	State Zip Code VA 22215			Amount of Each Disbursement this Period
	Purpose of Disbursement Contributions to federal candidates				2300.00
	Candidate Name John McCain			tegory/ Γype	
	ÿ	ement For: 2008 Primary Genera Other (specify)	I		

	CHEDULE B (FEC Form 3X)		•	Use separate schedule(s)			FOR LINE			E NUMBER: PAGE 26 / 44					44		
ΓEN	/IIZED DIS	SBURSEMEN	TS		category of the Summary Page			21b 27		22 28a	X	23 28b	, <u> </u>	24 28c		25 29	
		ed from such Reports															3
	•	MITTEE (In Full)	ng the name	and addre	55 OF ALTY POLITICAL	COII		ee io s	Olicit	COITE	ibuti	10115	11011	Sucii	COIIII	muee	
<b>\</b>		th Care Association	n Politica	I Action C	ommittee												
	II Name (Last, urphy for Coi	First, Middle Initial)							1	Trans				06005	9		
_										0 <sup>M</sup> 2			0 5		YY	οŏε	Y
Ма	ailing Address	PO Box 11721								0 2		L	Ų S			008	5
City Pit	y ttsburgh			State PA	Zip Code 15228-0721					Amou	nt of	f Ea	ch D	isburs		-	
	rpose of Disbu	rsement ederal Candidates				Г					0				.10	0.000	0
Cai	Indidate Name						ateg	-									
	fice Sought:	X House Senate		ement For:	2008 General		·yp		1								
Sta	ate: PA	President District: 18		Other (spe													
	•	First, Middle Initial)							-	Trans	acti	on I	D: [	6035	1		
Na	ational Repub	olican Congression	nal Comm	ittee						Date o	_				.,		V
Ма	ailing Address	320 1st St SE								0 2	М	/ L	2 8	8 /	ž	ο ὁ ε	3 <sup>Y</sup>
City	y ashington			State DC	Zip Code 20003-1838					Amou	nt of	f Ea	ch D	isburs	emen	t this F	Perio
Pur	rpose of Disbu				20000 1000			_		L.					7	500.0	0
	ntributions to F Indidate Name	Federal Committees					ateg	•									
Off	fice Sought:	House Senate President District:	Disburse	ement For: Primary Other (spe	General ecify) ▼												
		First, Middle Initial)							-	Tranc	acti	on l	ı <b>n</b> . Г	06006	<b>1</b>		
	ALLYSON SCHWARTZ FOR CONGRESS								1	Date o	of Di	isbu	rsen	nent			
Ма	ailing Address	P.O. Box 4570	6						1	0 <sup>M</sup> 2	М	/	0 5	)	<sup>Y</sup> 2	0 0 8	3
City Ph	y niladelphia			State PA	Zip Code 19149					Amou	nt of	f Ea	ch D	isburs	emen	t this F	Perio
	rpose of Disbu	rsement ederal Candidates								<u>L.</u>						250.0	0
	ındidate Name ep. Allyson Y	. Schwartz					ateg Type										
Off	fice Sought:	X House Senate		Primary	2008 General												
Sta	ate: PA	President District: 13		Other (spe	еспу) 🔻												
			-							_	_	_					

ΙT	CHEDULE B (FEC FOIII 3X)	Use separate schedule(s)	FOR LINE (check onl		E NUMBER: PAGE 27 / 44			
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		21b 27	22 X 23 24 25 28a 28b 28c 29	<u> </u>		
	y Information copied from such Reports and Staten for commercial purposes, other than using the nam							
$\rangle$	NAME OF COMMITTEE (In Full) American Health Care Association Politica	Action Committee						
<u> </u>	Full Name (Last, First, Middle Initial) ALLYSON SCHWARTZ FOR CONGRESS	3			Transaction ID: D60061 Date of Disbursement	YY		
	Mailing Address P.O. Box 45706				02 05 7 200	8 0		
	City Philadelphia	State Zip Code PA 19149			Amount of Each Disbursement thi			
	Purpose of Disbursement Contributions to Federal Candidates				750	0.00		
	Candidate Name Rep. Allyson Y. Schwartz		Cate Ty					
	Office Sought:  X House Senate President State: PA District: 13	ement For: 2008 Primary X General Other (specify)						
	Full Name (Last, First, Middle Initial) ANNA ESHOO FOR CONGRESS				Transaction ID: D60056 Date of Disbursement			
	Mailing Address PO Box 636				$\begin{bmatrix} 0 & 2 & M \\ 0 & 2 & M \end{bmatrix}$	Š8 <sup>°</sup>		
	City Annandale	State         Zip Code           VA         22003-0636			Amount of Each Disbursement thi			
	Purpose of Disbursement Contributions to Federal Candidates				1000	0.00		
	Candidate Name Rep. Anna Eshoo		Cate Ty					
	X III	ement For: 2008 Primary General Other (specify)						
	Full Name (Last, First, Middle Initial) COMMITTEE TO ELECT ARTUR DAVIS	O CONGRESS			Transaction ID: D60138 Date of Disbursement	v v		
	Mailing Address Post Office Box 1845				02 13 7 200	8 0		
		OL-1- 7'- O-1-			Amount of Each Disbursement thi	is Perio		
	City Birmingham	State Zip Code AL 35201						
	Birmingham  Purpose of Disbursement Contributions to federal candidates				1000	0.00		
	Birmingham Purpose of Disbursement		Cate Ty		1000	0.00		
	Birmingham  Purpose of Disbursement Contributions to federal candidates  Candidate Name Rep. Artur Davis  Office Sought: X House Disburse				1000	0.00		

В.

C.

SCHEDULE B (FEC Form 3X)		rate schedule(s)		OR LIN	_	R:		P	AGE	28 /	44
ITEMIZED DISBURSEMENTS		category of the Summary Page	È	21b 27	22 28a	Х	23 28b	24 28c		25 29	26 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				y persor	the pu		e of so	oliciting c		outions	
NAME OF COMMITTEE (In Full)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									
American Health Care Association Politica	I Action Co	ommittee									
Full Name (Last, First, Middle Initial) HOOSIERS FOR HILL					Date o	of Di	sburse		7		
Mailing Address PO Box 1071					0 2	M /	<sup>D</sup> 2	1 /	Ž	0 Ď 8	3 <sup>Y</sup>
City Seymour	State IN	Zip Code 47274			Amou	nt of	Each	Disburse	-	-	
Purpose of Disbursement Contributions to Federal Candidates									3	0.000	0
Candidate Name Rep. Baron Hill				egory/ /pe							
Senate X President	ment For: Primary Other (spe	2008 General cify)									
State: IN District: 09											
Full Name (Last, First, Middle Initial) HOOSIERS FOR HILL					Date o	of Di	sburse				
Mailing Address PO Box 1071					0 <sup>M</sup> 2	М /	2	1 /	Ž	0 Ď 8	3 <sup>Y</sup>
City Seymour	State IN	Zip Code 47274			Amou	nt of	Each	Disburse	-		
Purpose of Disbursement Contributions to Federal Candidates									5	000.0	0
Candidate Name Rep. Baron Hill				egory/ /pe							
Office Sought: X House Disburse Senate President	ment For: Primary Other (spe	2008 X General cify) ▼									
State: IN District: 09											
Full Name (Last, First, Middle Initial) STUPAK FOR CONGRESS					Date o	of Di	sburse				
Mailing Address 817 Ninth Avenue P.O. Box 156					0 2	M /	<sup>D</sup> 2	0 /	Ž	0 ŏ 8	3 <sup>Y</sup>
City Menominee	State MI	Zip Code 49858			Amou	nt of	Each	Disburse	-		
Purpose of Disbursement Contributions to Federal Candidates			i						1	000.C	0
Candidate Name Rep. Bart Stupak				egory/ /pe							
Senate X President	ement For: Primary Other (spe	2008 General									
State: MI District: 01											
SUBTOTAL of Disbursements This Page (optional)			 	. ▶					90	0.00	0

TOTAL This Period (last page this line number only) ......

IT		Use separate schedule			R LINE eck only		٠		l	. ,	E 29/4	-
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Pag			21b 27	22 28a	—	23 28b	ш.	24 28c	25 29	20
	y Information copied from such Reports and Stater for commercial purposes, other than using the nam NAME OF COMMITTEE (In Full)											
	American Health Care Association Politica	al Action Committee										
	Full Name (Last, First, Middle Initial) CHARLES A. GONZALEZ CONGRESSIO	NAL CAMPAIGN				Trans Date of			ement		ž 0 0 8	Υ
	Mailing Address PO Box 12612									L.	-	
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	Full Name (Last, First, Middle Initial) CHRISTOPHER SHAYS FOR CONGRES	S COMMITTEE						sburse	ement	_	Y Y Y	Y
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		ement For: 2008 Primary General Other (specify)	-!	Тур	е							
	Full Name (Last, First, Middle Initial) DAVE CAMP FOR CONGRESS 2008					Trans Date of	of Dis	sburse	ement			
	Mailing Address 5915 EASTMAN AVE. S	SUITE 100				o <sup>™</sup> 2	M /	<sup>D</sup> 0	) <b>4</b>	Y.	ž 0 ŏ 8	3 Y
	City MIDLAND	State Zip Code MI 48640				Amou	nt of	Each	Disbu	ursem	ent this F	Period
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Mailing Ad	ddress 30151 TOMAS	STREET		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
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	f Disbursement ons to Federal Candidates			1000.00
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	f Disbursement ons to Federal Candidates			3000.00
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
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Candidate Name Rep. Heath Shuler		Category/ Type	
Senate X President	ment For: 2008 Primary General Other (specify)	•	
State: NC District: 11  Full Name (Last, First, Middle Initial)			Transaction ID: D60060
BARRETT FOR CONGRESS			Transaction ID: D60062 Date of Disbursement
Mailing Address P.O. Box 869			$\begin{bmatrix} \begin{smallmatrix} M & 2 & M \\ 0 & 2 & M \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} D & D \\ 0 & 5 \end{smallmatrix} \end{bmatrix} / \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y & Y \\ 2 & 0 & 0 & 8 \end{bmatrix}$
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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE N	
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NAME OF COMMITTEE (In Full)			
American Health Care Association Political	Action Committee		
Full Name (Last, First, Middle Initial) FRIENDS OF JOHN BOEHNER			Transaction ID: D60378 Date of Disbursement
Mailing Address 7908-I2 Cincinnati Dayto	n Road		02 7 29 7 2008
,	State Zip Code OH 45069		Amount of Each Disbursement this Period
Purpose of Disbursement Contributions to Federal Candidates			5000.00
Candidate Name Rep. John A. Boehner		Category/ Type	
Senate X President	ment For: 2008 Primary General Other (specify)		
State: OH District: 08			
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	Mailing Address POST OFFICE BOX 1	0986				0 2		13	3	2	0 0 8	
	City ROCK HILL	State Zip Code SC 29731				Amoui	nt of E	ach D	Disburs			
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TEMIZED DISBURSEMENTS    Use separate schedule(s) for each category of the Detailed Summary Page	Category/ Type	22         X         23         24         25           28a         28b         28c         29           for the purpose of soliciting contributions
or for commercial purposes, other than using the name and address of any political  NAME OF COMMITTEE (In Full)  American Health Care Association Political Action Committee  Full Name (Last, First, Middle Initial)  COURTNEY FOR CONGRESS  Mailing Address 38 Risley Road  City State Zip Code  CT 06066  Purpose of Disbursement  Contributions to Federal Candidates  Candidate Name  Rep. Joseph Courtney  Office Sought: X House Senate President  State: CT District: 02  Full Name (Last, First, Middle Initial)  COURTNEY FOR CONGRESS  Mailing Address 38 Risley Road  City State Zip Code  CT 06066  Purpose of Disbursement  Contributions to Federal Candidates  Candidate Name  Rep. Joseph Courtney  Office Sought: X House CT 06066  Purpose of Disbursement  Contributions to Federal Candidates  Candidate Name  Rep. Joseph Courtney  Office Sought: X House Primary X General  President  State: CT District: 02  Full Name (Last, First, Middle Initial)  Other (specify)   Other (specify)   Other (specify)   Full Name (Last, First, Middle Initial)	Category/ Type	Transaction ID: D60238 Date of Disbursement  M M M / D D D / Y Y Y O Y S  Amount of Each Disbursement this Period  1000.00  Transaction ID: D60239 Date of Disbursement  M M M / D D D / Y Y Y O Y S  Amount of Each Disbursement this Period  Amount of Each Disbursement this Period
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City Vernon CT 06066  Purpose of Disbursement Contributions to Federal Candidates  Candidate Name Rep. Joseph Courtney  Office Sought: X House Senate President State: CT District: 02  Full Name (Last, First, Middle Initial) COURTNEY FOR CONGRESS  Mailing Address 38 Risley Road  City State Zip Code CT 06066  Purpose of Disbursement Contributions to Federal Candidates  Candidate Name Rep. Joseph Courtney  Office Sought: X House Senate Primary General Candidate Name Rep. Joseph Courtney  Office Sought: X House Senate Primary X General Other (specify) ▼  State: CT District: 02  Full Name (Last, First, Middle Initial)	Type	Amount of Each Disbursement this Period  1000.00  Transaction ID: D60239 Date of Disbursement  M 2 M / D D D / Y Y Y O N 8  Amount of Each Disbursement this Period
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Contributions to Federal Candidates  Candidate Name Rep. Joseph Courtney  Office Sought: X House Senate Primary X General Other (specify)  State: CT District: 02  Full Name (Last, First, Middle Initial)	Cotomord	5000.00
Rep. Joseph Courtney  Office Sought:		
Senate Primary  Notate: CT  District: 02  Full Name (Last, First, Middle Initial)  Primary  Notate: CT  Other (specify)  The primary  Notate:	Category/ Type	
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Mailing Address 301 W. Platt Street #385		$\begin{bmatrix} 0 & 2 & M & 1 & 3 & 1 & 2 & 2 & 2 & 2 & 4 & 4 & 4 & 4 & 4 & 4$
City State Zip Code Tampa FL 33606		Amount of Each Disbursement this Perio
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American Health Care Association Political	Action Co	ommittee													
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Full Name (Last, First, Middle Initial) BRADY FOR CONGRESS							Trans Date		-	_	D6025 ment	1			
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Mailing Address P.O. Box 8277	<b>-</b>							_	_					0	
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State: TX District: 08	· · ·	<i>37</i> , <b>4</b>													
Full Name (Last, First, Middle Initial)							Trans	acti	on I	D:	D6038	5			
DOGGETT FOR US CONGRESS							Date	of Di	isbu	rsei	ment				
Mailing Address PO Box 5743							o <sup>M</sup> 2	M	/ [	2	9 /	Υ	ž 0 ŏ	8 <sup>Y</sup>	
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Candidate Name Rep. Lloyd Doggett					egory/ ype										
Office Sought: X House Disburse	ment For:	2008			71										
	Primary	General													
President State: TX District: 25	Other (spe	cify) 🔻													
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Mailing Address 38 Ivy St SE							0 <sup>M</sup> 2		Ĺ	2	Ŏ Í		ŽΟĎ	8	
	State DC	Zip Code 20003-4006					Amou	nt o	f Ea	ch [	Disburs	eme	ent this	Per	iod
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NAME OF COMMITTEE (In Full)  American Health Care Association Polit			
Full Name (Last, First, Middle Initial) SOUDER FOR CONGRESS INC.			Transaction ID: D60139 Date of Disbursement
Mailing Address P.O. BOX 40233			02 13 7 2008
City FORT WAYNE	State Zip Cod IN 46804	е	Amount of Each Disbursement this Perio
Purpose of Disbursement Contributions to federal candidates			2000.00
Candidate Name Rep. Mark Souder		Category/ Type	
Office Sought:    X House   Disbute     Senate   President     State: IN District: 03	x Primary Ge Other (specify) ▼	8 eneral	
Full Name (Last, First, Middle Initial) MARK UDALL FOR CONGRESS INC.			Transaction ID: D60084 Date of Disbursement
Mailing Address 8690 Wolff Court #20	0		02 7 06 7 2008
City Westminster	State Zip Cod CO 80031	е	Amount of Each Disbursement this Perio
Purpose of Disbursement Contributions to Federal Candidates			750.00
Candidate Name Rep. Mark E Udall		Category/ Type	
Office Sought:  X House Senate President State: CO District: 02	x Primary Ge Other (specify) ▼	8 eneral	
Full Name (Last, First, Middle Initial) MARK UDALL FOR CONGRESS INC.			Transaction ID: D60222 Date of Disbursement
Mailing Address 8690 Wolff Court #20	0		02 7 20 7 20 8
City Westminster	State Zip Cod CO 80031	е	Amount of Each Disbursement this Perio
Purpose of Disbursement Contributions to Federal Candidates			2500.00
Candidate Name Rep. Mark E Udall		Category/ Type	
	ursement For: 200		
Office Sought: X House Disbute Senate President State: CO District: 02	X Primary Ge Other (specify) ▼	શાસ તા	

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Π	TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page		(check on 21b 27	22 28a	23 28b	24 28c	25 29	26 30b
	ny Information copied from such Reports and Staten for commercial purposes, other than using the nam								;
	NAME OF COMMITTEE (In Full)  American Health Care Association Politica								
<b>∠</b> . <b>A</b> .	Full Name (Last, First, Middle Initial) ARCURI FOR CONGRESS				Date of	ction ID: [	nent		
	Mailing Address P.O. Box 8508				0 2	<sup>/</sup> 2 1		ž o ŏ e	3
	City Utica	State Zip Code NY 13505			Amount	of Each D	isbursemer		
	Purpose of Disbursement Contributions to Federal Candidates						5	0.000	0
	Candidate Name Rep. Michael Arcuri		ı	egory/ ype					
	Senate X President	ement For: 2008 Primary General Other (specify)							
_	State: NY District: 24  Full Name (Last, First, Middle Initial)				Transac	ction ID:	)60245		
B.	ARCURI FOR CONGRESS				Date of	Disbursen	nent	y	Y
	Mailing Address P.O. Box 8508				0 2	2 1		ž o ŏ 8	3
	City Utica	State Zip Code NY 13505			Amount	of Each D	isbursemer	nt this F	Period
	Purpose of Disbursement Contributions to Federal Candidates				<u> </u>		5	0.000	0
	Candidate Name Rep. Michael Arcuri		ı	tegory/					
	Office Sought:  X House Senate President  State: NY District: 24	ement For: 2008 Primary X General Other (specify)							
С.	Full Name (Last, First, Middle Initial) NITA LOWEY FOR CONGRESS					ction ID: [ Disbursen	nent		
	Mailing Address PO Box 271				0 2	<sup>/</sup> <sup>D</sup> 2 0		ž o ŏ e	3 Y
	City White Plains	State Zip Code NY 10605			Amount	of Each D	isbursemer		-
	Purpose of Disbursement Contributions to Federal Candidates							500.0	0
	Candidate Name Rep. Nita M. Lowey			egory/ ype					
	Senate X President	ement For: 2008 Primary General Other (specify)							
Γ	State: NY District: 18					• • •		<b>-</b> 00.0	
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					of for the purpose of soliciting contributions solicit contributions from such committee
NAME OF C	COMMITTEE (In Full) Health Care Association				
,	Last, First, Middle Initial) OF PATRICK J. KENI	NEDY INC.			Transaction ID: D60057 Date of Disbursement
Mailing Add	ress P.O. Box 321				$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Pawtucket	-	State RI	Zip Code 02860		Amount of Each Disbursement this Perio
Contribution	Disbursement s to Federal Candidates			•	1000.00
	ck J. Kennedy	I 8:-1		Category/ Type	
Office Soug State: RI	ht: X House Senate President District: 01	Disbursement F  X Prima Other		al	
Full Name (I	Last, First, Middle Initial) OR CONGRESS				Transaction ID: D60381 Date of Disbursement
Mailing Add	ress 2021 E Dublin	Granville Road			$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
City Columbus		State OH	Zip Code 43229		Amount of Each Disbursement this Perio
•	Disbursement s to Federal Candidates				2000.00
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Candidate N				Type	
Candidate N Rep. Patri Office Soug	Jame ck J. Tiberi ht: X House Senate President	Disbursement F  X Prima Other		Туре	
Candidate N Rep. Patri Office Soug State: OH Full Name (I	Jame ck J. Tiberi ht: X House Senate	X Prima Other	ary Gener r (specify) ▼	Type al	Transaction ID: D60380 Date of Disbursement
Candidate N Rep. Patri Office Soug State: OH Full Name (I	lame ck J. Tiberi  ht: X House Senate President District: 12  Last, First, Middle Initial) R CONGRESS COMM	X Prima Other	ary Gener r (specify) ▼	Type al	
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of recommercial purposes, other than using the name and address of any political committee to solicit contributions from such committee  NAME OF COMMITTEE (In Full)  American Health Care Association Political Action Committee  Full Name (Last, First, Middle Initial)  RODNEY ALEXANDER FOR CONGRESS INC.  Mailing Address PO Box 387  City State Zip Code Quittman LA 71268  Purpose of Disbursement Contributions to Federal Candidates  Candidate Name (Box First, Middle Initial)  KLEIN FOR CONCRESS  Mailing Address 21301 POWERLINE ROAD SUITE 204  City State: LA District: 05  Caltogory' Type  Office Sought: X House Senate President Contributions to Federal Candidates  Candidate Name (Box First, Middle Initial)  KLEIN FOR CONCRESS  Mailing Address 21301 POWERLINE ROAD SUITE 204  City State: LA District: 22  Full Name (Last, First, Middle Initial)  KLEIN FOR CONCRESS  Mailing Address 21301 POWERLINE ROAD SUITE 204  City State: Full District: 22  Full Name (Last, First, Middle Initial)  KLEIN FOR CONCRESS  Mailing Address 21301 POWERLINE ROAD SUITE 204  City State: Full District: 22  Full Name (Last, First, Middle Initial)  KLEIN FOR CONCRESS  Mailing Address 21301 POWERLINE ROAD SUITE 204  City State: Full District: 22  Full Name (Last, First, Middle Initial)  KLEIN FOR CONCRESS  Mailing Address 21301 POWERLINE ROAD SUITE 204  City State: Full District: 22  Full Name (Last, First, Middle Initial)  KLEIN FOR CONCRESS  Mailing Address 21301 POWERLINE ROAD SUITE 204  City State: Full District: 22  Full Name (Last, First, Middle Initial)  KLEIN FOR CONCRESS  Mailing Address 21301 POWERLINE ROAD SUITE 204  City State: Full District: 22  Full Name (Last, First, Middle Initial)  KLEIN FOR CONCRESS  Mailing Address 21301 POWERLINE ROAD SUITE 204  City State: Full District: 22  Full Name (Last, First, Middle Initial)  KLEIN FOR CONCRESS  Mailing Address 21301 POWERLINE ROAD SUITE 204  City State: Full District: 22  Full Name (Last, First, Middle Initial)  Category' Type  Transaction ID: D60242  Date of Disbursement 1 Power 1 Power	ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	21b 22	
American Health Care Association Political Action Committee  Full Name (Last, First, Middle Initial) RODNEY ALEXANDER FOR CONGRESS INC.  Mailing Address PO Box 367  City State Zip Code Quitman LA 71268 Purpose of Disbursement Contributions to Federal Candidates Candidate Name Rep. Rodney Alexander Office Sought: X House Senate President State: LA District: 05  Full Name (Last, First, Middle Initial) KLEIN FOR CONGRESS  Mailing Address 21301 POWERLINE ROAD SUITE 204  City State: FL District: 22  Full Name (Last, First, Middle Initial) State: FL District: 22  Full Name (Last, First, Middle Initial)  KLEIN FOR CONGRESS  Mailing Address 21301 POWERLINE ROAD SUITE 204  City Senate President State: FL District: 22  Full Name (Last, First, Middle Initial) KLEIN FOR CONGRESS  Mailing Address 21301 POWERLINE ROAD SUITE 204  City Senate President State: FL District: 22  Full Name (Last, First, Middle Initial) KLEIN FOR CONGRESS  Mailing Address 21301 POWERLINE ROAD SUITE 204  City Senate President State: FL District: 22  Full Name (Last, First, Middle Initial) KLEIN FOR CONGRESS  Mailing Address 21301 POWERLINE ROAD SUITE 204  City Senate President State: FL District: 22  Full Name (Last, First, Middle Initial) KLEIN FOR CONGRESS  Mailing Address 21301 POWERLINE ROAD SUITE 204  City Senate President State: FL District: 22  Substate Zip Code FL 33433  Purpose of Disbursement Contributions to Federal Candidates Candidate Name Rep. Ron Klein  Office Sought: House President Soudout of Each Disbursement this Period  Disbursement For: 2008 Senate Primary K General Cother (specify) ▼  Substate: FL District: 22  Substate: FL Distr				
Full Name (Last, First, Middle Initial) RODNEY ALEXANDER FOR CONGRESS INC.  Mailing Address PO Box 367  City City Cultran LA 71268  Purpose of Disbursement Contributions to Federal Candidates Candidate Name Rep. Rodney Alexander Office Sought: Values Senate President State: LA District: 95  Full Name (Last, First, Middle Initial) KLEIN FOR CONGRESS  Mailing Address 21301 POWERLINE ROAD SUITE 204  City BOCA RATON FL 33433  Purpose of Disbursement Contributions to Federal Candidates Candidate Name Rep. Ron Klein Office Sought: Values Senate President State: FL District: 22  Full Name (Last, First, Middle Initial) KLEIN FOR CONGRESS  Mailing Address 21301 POWERLINE ROAD SUITE 204  City BOCA RATON FL 33433  Purpose of Disbursement Contributions to Federal Candidates Candidate Name Rep. Ron Klein Office Sought: Values State: FL District: 22  Full Name (Last, First, Middle Initial) KLEIN FOR CONGRESS  Mailing Address 21301 POWERLINE ROAD SUITE 204  City BOCA RATON FL 33433  Transaction ID: D60242 Date of Disbursement this Period  Transaction ID: D60243 Date of Disbursement Total Part of Category' Type  Amount of Each Disbursement Total Part of Category' Type  Transaction ID: D60243 Date of Disbursement Total Part of Category' Type  Amount of Each Disbursement Total Part of Category' Type  Category' Type  Amount of Each Disbursement Total Part of Category' Type  Category' Type  Amount of Each Disbursement Total Part of Category' Type  Category' Type  Amount of Each Disbursement Total Part of Category' Type  Categor	NAME OF COMMITTEE (In Full)			
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City Quitman LA Zip Code LA Contributions to Federal Candidates Candidate Name Rep. Roth Klein Purpose of Disbursement Contributions to Federal Candidates Candidate Name Rep. Roth Klein For Concept Name (Last, First, Middle Initial) Reproductions to Federal Candidates Candidate Name (Last, First, Middle Initial) Reproductions to Federal Candidates Candidate Name Rep. Roth Klein For Concepts Yield Name (Last, First, Middle Initial) Reproductions to Federal Candidates Candidate Name Rep. Roth Klein For Concepts Yield Name (Last, First, Middle Initial) Reproductions to Federal Candidates Candidate Name Rep. Roth Klein President State: FL District: 22  Full Name (Last, First, Middle Initial) Reproductions to Federal Candidates Candidate Name Rep. Roth Klein President State: FL District: 22  Full Name (Last, First, Middle Initial) Reproductions to Federal Candidates Candidate Name Rep. Roth Klein Contributions to Federal Candidates Candidate Name Rep. Roth Klein Contributions to Federal Candidates Candidates Name Rep. Roth Klein Contributions to Federal Candidates Candidates Name Rep. Roth Klein Contributions to Federal Candidates Candidate Name Rep. Roth Klein Contributions to Federal Candidates Candidates Name Rep. Roth Klein Contributions to Federal Candidates Candidates Name Rep. Roth Klein Contributions to Federal Candidates Candidates Name Rep. Roth Klein Contributions to Federal Candidates Candidates Name Rep. Roth Klein Contributions to Federal Candidates Candidates Name Rep. Roth Klein Contributions to Federal Candidates Candidates Name Rep. Roth Klein Contributions to Federal Candidates Candidates Name Rep. Roth Klein Contributions to Federal Candidates Candidates Name Rep. Roth Klein Contributions to Federal Candidates Candidates Name Rep. Roth Klein Contributions to Federal Candidates Candidates Name Rep. Roth Klein Contributions to Federal Candidates Candidates Name Rep. Roth Klein Contributions to Federal Candidates Candidates Name Rep. Roth Klein Contributions to Federal Candidates Candidates Name Re		GRESS INC.	Date	of Disbursement
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Contributions to Federal Candidates Candidate Name Rep. Rodony Alexander Office Sought:			Amou	
Rep. Rodney Alexander  Office Sought:	•			1000.00
Senate President Other (specify) ▼    State: LA District: 05   Pull Name (Last, First, Middle Initial)				
Full Name (Last, First, Middle Initial) KLEIN FOR CONGRESS  Mailing Address 21301 POWERLINE ROAD SUITE 204  City State Zip Code BOCA RATON FL 33433  Purpose of Disbursement Contributions to Federal Candidates  Candidate Name Rep. Ron Klein  Office Sought: X House Senate President State FL 33433  Full Name (Last, First, Middle Initial)  KLEIN FOR CONGRESS  Mailing Address 21301 POWERLINE ROAD SUITE 204  City State FL 33433  Purpose of Disbursement For: 2008  Mailing Address 21301 POWERLINE ROAD SUITE 204  City BOCA RATON FL 33433  Purpose of Disbursement For: 2008  Scandal President State FL 33433  Purpose of Disbursement For: 2008  Condidate Name Rep. Ron Klein  Office Sought: X House Senate Primary X General Contributions to Federal Candidates  Candidate Name Rep. Ron Klein  Office Sought: X House Senate Primary X General Contributions to Federal Candidates  Candidate Name Rep. Ron Klein  Office Sought: X House Senate Primary X General Contributions to Federal Candidates  Category/ Type  Disbursement For: 2008  Senate Primary X General Category/ Type  Disbursement For: 2008  Subtotal of Disbursements This Page (optional) ■ 11000.00	Senate President	X Primary General		
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BÔCA RATON  Purpose of Disbursement Contributions to Federal Candidates Candidate Name Rep. Ron Klein  Office Sought:  X House Senate President State: FL District: 22  Full Name (Last, First, Middle Initial) KLEIN FOR CONGRESS  Mailing Address  City BOCA RATON Contributions to Federal Candidates  Candidate Name Rep. Ron Klein  City BOCA RATON FL 33433  Amount of Each Disbursement this Period  Category/ Type  Transaction ID: D60243 Date of Disbursement  M 2 M / S 2 D / Y 2 0 0 8  Amount of Each Disbursement this Period  Category/ Type  Amount of Each Disbursement this Period  Category/ Type  State Primary Ageneral President State: FL District: 22  Subtrotal of Disbursements This Page (optional)  ■ 11000.00	Mailing Address 21301 POWERLII	NE ROAD SUITE 204		M / 21 / Y 2008
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Full Name (Last, First, Middle Initial) KLEIN FOR CONGRESS  Mailing Address 21301 POWERLINE ROAD SUITE 204  City State Zip Code BOCA RATON FL 33433  Purpose of Disbursement Contributions to Federal Candidates Candidate Name Rep. Ron Klein  Office Sought: X House Senate Primary X General President State: FL District: 22  SUBTOTAL of Disbursements This Page (optional)	Senate President	X Primary General		
Mailing Address 21301 POWERLINE ROAD SUITE 204  City State Zip Code BOCA RATON FL 33433  Purpose of Disbursement Contributions to Federal Candidates  Candidate Name Rep. Ron Klein  Office Sought: X House Senate Primary X General President Other (specify) ▼  State: FL District: 22  SUBTOTAL of Disbursements This Page (optional)				
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•	First, Middle Initial) ROSA DELAURO							Transaction ID: D60225 Date of Disbursement										
Mailing Address	49 HUNTINGTON	STREET					C	2	M /	D	20	] / [	ž	0 ὁ ε	} Y			
City NEW HAVEN		State CT	Zip Code 06511				Ar	nou	nt of	Eac	ch Di	sburse	emen	t this F	•erio			
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State: CT	District: 03	30101 (35	J/ <b>▼</b>															
,	Full Name (Last, First, Middle Initial) SHELLEY MOORE CAPITO FOR CONGRESS										<b>D:</b> D	60137 ent	7					
Mailing Address	P.O. Box 11519						C	2	M /	/ D	13	/ [	Ý ž	οŏε	} Y			
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Candidate Name Rep. Shelley M					ateg	•												
Office Sought:	X House Di Senate President	sbursement For:  X Primary  Other (spe	2008 General															
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Full Name (Last, PRICE FOR C	First, Middle Initial)						Da	ate c	of Di	sbur	sem							
Mailing Address	1970 Roswell Rd.							2	M /	D	0 4	]	ž	0 δ ε	} Y			
City Marietta		State GA	Zip Code 30062-3902				Ar	nou	nt of	Eac	ch Di	sburse	emen	t this F	erio			
Purpose of Disbu Contributions to	ursement Federal Candidates			Г	•								1(	0.000	0			
Candidate Name Rep. Tom Pric					ateg													
Office Sought:	X House Di Senate President	sbursement For:  X Primary Other (sp	2008 General				-											
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$\left.\right\rangle$	NAME OF COMMITTEE (In Full)  American Health Care Association Politic	· · · · · · · · · · · · · · · · · · ·	34. 35	
<u>/</u>	Full Name (Last, First, Middle Initial) THORNBERRY FOR CONGRESS COMI	MITTEE		Transaction ID: D60383 Date of Disbursement
	Mailing Address P.O. Box 9392			$\begin{bmatrix} M & M & / & D & D & / & Y & Y & Y & Y & Y & Y & Y & Y & Y$
	City Amarillo	State Zip Code TX 79105	_	Amount of Each Disbursement this Period
	Purpose of Disbursement Contributions to Federal Candidates			2000.00
	Candidate Name Rep. William Thornberry		Category/ Type	
	· -	sement For: 2008  X Primary General  Other (specify)	d .	
	Full Name (Last, First, Middle Initial) CITIZENS FOR ARLEN SPECTER			Transaction ID: D60163 Date of Disbursement
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	Purpose of Disbursement		0 0	2000.00
	Contributions to Federal Candidates		_	
	Candidate Name Sen. Arlen Specter		Category/ Type	
	Candidate Name Sen. Arlen Specter  Office Sought: House X Senate President	sement For: 2008  K Primary General Other (specify)	Туре	
	Candidate Name Sen. Arlen Specter  Office Sought: House X Senate	X Primary Genera	Туре	<b>Transaction ID:</b> D60135 Date of Disbursement
	Candidate Name Sen. Arlen Specter  Office Sought: House X Senate President State: PA District: 00  Full Name (Last, First, Middle Initial)	X Primary General Other (specify) ▼	Туре	
	Candidate Name Sen. Arlen Specter  Office Sought: House X Senate President State: PA District: 00  Full Name (Last, First, Middle Initial) REED COMMITTEE	X Primary General Other (specify) ▼	Туре	Date of Disbursement  O 2
	Candidate Name Sen. Arlen Specter  Office Sought: House X Senate President State: PA District: 00  Full Name (Last, First, Middle Initial) REED COMMITTEE  Mailing Address 200 Midway Rd, Ste 16  City CRANSTON Purpose of Disbursement Contributions to federal candidates	X Primary General Other (specify) ▼  8  State Zip Code	Type	Date of Disbursement  O 2
	Candidate Name Sen. Arlen Specter  Office Sought: House X Senate President State: PA District: 00  Full Name (Last, First, Middle Initial) REED COMMITTEE  Mailing Address 200 Midway Rd, Ste 16  City CRANSTON  Purpose of Disbursement Contributions to federal candidates  Candidate Name Sen. Jack Reed	R Primary General Other (specify)   State Zip Code RI 02920	Туре	Date of Disbursement  O 2
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